

Direct Payment Form

City of Hutto Utility Billing 40I West Front Street Hutto TX 78634 Phone: 5I2-759-4055 Fax: 5I2-846-2653 utilitybilling@huttotx.gov www.huttotx.gov

The Direct Payment Plan will help you in several ways:

- It saves time-fewer checks to write.
- Helps meet your commitment in a convenient and timely manner even if you are on vacation or out of the town.
- No lost or misplaced statements, your payment is always on time- it helps maintain good credit.
- No late charges and no worries of disconnection of services due to non-payment.
- It saves postage.
- It is easy to sign up or easy to cancel.

Here is how the Direct Payment Plan works:

You authorize regularly scheduled payments to be made from your checking or savings account. Then, just sit back and relax. Your payments will be drafted automatically within fifteen days of the billing date. If the due date falls on a weekend then it will be the following Monday and proof of your payment will appear on your next statement. The authority you give to charge your account will remain in effect until you notify us thirty days in advance in writing to terminate the authorization. The amount of your payment will be on your monthly utility bill that is mailed out each month. If a utility bill is not received the customer is responsible for obtaining the amount of the bill from the city utilities office. To take advantage of this service, complete the attached form and return it to us.

All you need to do is the following steps to complete the attached authorization form:

- Please check next to check or savings to indicate which account your payment will be deducted from.
- 2. Fill in your name, financial institution name and location and date.
- 3. Attach a voided check and please fill in your bank account number and routing number.
- 4. Sign the authorization form.



Authorization for Direct Payment Plan

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I authorize the City of Hutto to initiate electronic debit entries to my:

CHECKING ACCOUNT	OR	SAVINGS ACCOUNT
For payment of my City of Hutto utility bill, I unders billing cycles. If a utility bill is not received it is my city office. My payments will be drafted automationals on a weekend then it will be the following Motransactions to my account must comply with the effect until I have completed and turned in a Canc	responsib cally within onday. I ac provisions	ility to obtaining the amount of the bill from the n fifteen days of the billing date. If the due date knowledge that the origination of ACH soft U.S. law. This authorization will remain in
(PLEASE PRINT)		
Name: (FIRST)		(LAST)
Physical Address:		
Utility Account #:		
Financial Institution Name:		
Account Number at Financial Institution:		
Financial Institution Routing/Transit		
Number: Financial Institution City and State	e:	
Signature:		
		Date:
PLEASE KEEP A COPY OF THE AUTHORIZATION FORM FOR YOUR RECORDS		
STAPLE VOIDED CHECK HERE		
OFFICE USE ONLY		
Date of first draft:		U.A.S. Initials: